

Eggs on Dysentery

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By Joseph A. Tate of Pennsylvania
passed March 21. 1846

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An account of an epidemic dysentery, as
it appeared in Bedford County, and the
eastern part of the state of Pennsylvania,
during the summer of 1815.

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As a history of dysentery has been given by many medical authors, whose writings we have had an opportunity of consulting, I will try and give a short account of it, as it appeared in Bedford County, and more particularly throughout the state of Pennsylvania during the last summer, from the best information I could receive from practitioners who continued with it, in different parts of the state where it prevailed. My object in extending this account throughout the state, is, to get it in all its malignant and ~~hideous~~ forms, in which it did not appear under my immediate observation.

As far as my information is correct, this disease was prevalent throughout all the eastern part of this state, and that with the greatest malignancy and fatality, and the farther west it extended, the milder it appeared to get in its pernicious effects. But, that the causes

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of the disease were the same, wherever it occurred, I am fully satisfied, from the information I have obtained, from different practitioners who contended with it.

The first case of this disease, which came under my notice in Bedford County, was about the first of September, previous to which, the weather had been exceedingly dry and hot, for the preceding month, and consequent to which there fell a heavy and cool rain as it was observed, for the time of year; this rain was not of long duration but it cooled the atmosphere, and dampened the earth considerably; after this rain, we had dews and fogs every night and morning, and it was not until these dews and fogs made their first appearance, that this disease commenced its ravages in our part of the country, but for some time previous to ~~this~~ ^{the}, it had been prevalent in the eastern part of the state, which being brought on in the same way, prompted me to

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conclude that the predisposing cause was the cold and dampness of the atmosphere, which tended to debilitate the system, which gave room for the exciting causes to act, which as I suppose were contained in or set into motion by these dew and fogs; and another circumstance that tended to confirm this supposition, was, that the first few cases of the disease I met with were most malignant, which gradually grew milder as the dampness of the weather disappeared until it vanished entirely.

The first few cases I saw of this disease generally attacked the patient with lassitude, cold shivering, with succeeding heat and other symptoms of fever. It at other times commenced with a bad taste in the mouth, loss of appetite, costiveness or an inclination to go to stool, sickness at stomach and not unfrequently vomiting. In a few cases where I saw it attack children, it was attended with a bloated countenance and the lips somewhat

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swelled which would have caused me to think it worms, had not the dysenteric stools, tenesmus and all the other symptoms of this hideous disease been present. Some cases of this disease commenced with a slight pain in the head not sufficient to apprise the patient of his disease, until some more deleterious symptoms would lay him prostrate.

This disease was attended with pain in the head, loins, and abdomen, with griping and tenesmus, and I never saw a case unattended with fever.

This fever was of the remitting kind, sometimes inflammatory and at other times typhus.

The pulse was various in this disease, in the first stage it was full and frequent and very seldom could any tenesmus be perceived. It always tended to typhus, and the greatest caution was necessary in the application of remedies.

The matter discharged by stool varied in the different stages ^{or} types of the disease, at the very onset of it there was nothing but a white

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acid mucus discharged, resembling somewhat
the discharge from the sniderian membrane of
the nose, which gave severe pain in the discharge
of it. But when the disease was supposed to run
on any time, and as it approached to typhus,
the stools became more and more tinged with
blood. It most generally happened that sey-
bala were present in this disease, which gene-
rally gave great pain to the patient in the
discharge of them, and which had most gene-
rally to be assisted by mild enemata, so as to
produce as little irritation as possible.

Those cases of this disease in which medical
assistance was not applied for early, proved
most generally very difficult to manage, and
in those cases in particular in which the pa-
tient was of ardent constitution, or addicted to
the use of ardent spirits. This I have been
convinced of several times since I began the
study of medicine. And I think I might

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truction to old and young people, as it is to
this class of mankind it is so generally fatal.
As to the duration of this disease; it differed
according to the age and constitution of the pa-
tient. In some cases it lasted only a few days,
and vanished entirely. In others, again, it las-
ted weeks, but this last disease was totally
of a different type from the former, and
put on all the malignancy imaginable.

It sometimes ^{two} ~~x~~ to diarrhoea, which was a very un-
favourable symptom in the second stage of the
disease, and if it could not be stopped immediat-
ly, proved very speedily fatal.

This disease was epidemic, it laid prostrate
all whom it had the least opportunity of attack-
ing, neither was it confined to any particular
class of people; it spared neither age nor sex,
rich nor poor. It even attacked infants.

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on their mother's laps. The old and young appeared to be more subject to it than those of a middle age. Excessive drinkers of ardent spirits were more frequently attacked by it than those of sober habits. And the men in general ^{were} more frequently attacked by it than the women. In fact it appeared to attack only those who had been or were under the influence of some predisposing cause, which appears to agree very well with the opinions of those authors who advocate the doctrine of predisposing causes. ✓

As there appears to be a controversy now existing among physicians, concerning the difference of the words contagious and infectious, I shall not partake of the debate, but as the words appear to me to differ in their true meaning, I shall use them as such in this essay.

I believe that the most general and received opinion now among physicians, is, that

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is taken in at the mouth or nostrils.

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Dr Cullen says that this disease is never taken
in any other way than by contagion, and I
would conclude from this he thought the words
or synonymous, for it must appear evident,
that this disease cannot always be taken in
by the pores of the skin or by the capillary
vessels; much sooner can we believe that the
disease is inhaled ~~at~~ at the mouth and nostrils.

Dr Sydenham must undoubtedly have thought
this disease frequently infectious, for says he,
I frequently met with dysentery brought on
by a pollution of the atmosphere with some
noxious insect.

Diagnosis

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As there are some diseases which put on many
of the symptoms of dysentery, and which might
very often be mistaken for it, it is of impor-
tance to be well acquainted with the distin-

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acquiring symptoms, and to pay particular at-
tention to these when called to see a patient
where the disease is suspected.

from Cholera morbus, by the profuse stools
in this, and the absence of tenesmus, and
by the vomiting being generally more copious
in this than ~~than~~ in dysentery, in which
it is not always present and not so much
of a bilious nature, and in the latter scybala
being most generally present, which give great
pain in the discharge of them. These symp-
toms are always sufficient to distinguish these
diseases, but under those circumstances I have
known this disease mistaken from inattention
to the symptoms.

It might likewise be mistaken for several other
diseases, such as diarrhoea, worms, piles &c,
but can always be known by the symptoms
above enumerated, which are peculiar to
it, and its always being attended with fever.

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Predisposing Causes

That a predisposing cause affects the system in every infectious disease before an exciting cause can affect it, is now a very general opinion among physicians, and in my opinion appears evident to a physician every day in his practice, or why would not all who are subject to the same exciting causes take the prevailing disease.

As Galen justly remarks, no exciting cause can affect the system without a predisposition; otherwise say he, all those who are subject to assemblers sun would be as liable to an attack of fever, as those who are intemperate in eating and drinking, are passionate, or grieved, or in any way subject to debilitating causes.

Dr Cullen likewise remarks, that the most powerful contagions cannot affect the system without being under certain circumstances which render it capable of receiving this contagion.

Hippocrates when speaking of epidemic diseases in

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general, says, that when many are attacked by the same disease, the cause is to be attributed to that which is common and made use of by all.

This is an applicable sentence to the disease of dysentery, for we generally observe that it is generally attended with a debilitating cause which is common to all who take the disease, such as cold damp weather succeeding to heat.

It must appear then, from the opinions of these great men, and our own observation, that the predisposing causes of dysentery, are any thing that tends to debilitate the system, applied either externally or internally to it, ~~of~~ ~~from~~ such as passions of the mind, grief, fear, intemperance in eating and drinking, labour, fatigue, however induced, a low watery diet &c. &c.

Exciting Causes

That the exciting causes of dysentery are most generally contained in the atmosphere, must appear evident from its disposition to attack

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so many people at the same time and at a great distance from each other, and we know of no way in which it could be propagated in such a manner, but through the medium of the atmosphere, and that these exciting causes are noxious vapours polluting the atmosphere, such as animal and vegetable putrefaction, marsh miasmata, and as Dr Sydenham observes, a pollution of the atmosphere by noxious species of insect or fly. This putrefactive vapour or marsh Miasmata according to the theory of the ingenious Dr Barrois, when taken into the stomach, which he considers the primary link of the great chain of associate action, acts as a very powerful stimulus to that organ, which wearing down the excitability of it, and it immediately sympathising with the heart and all the rest of the system, brings on a very malignant disease, and always tending to indirect

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convinced this dysentery partook of, and fur-
ther, according to the doctrine of Dr Darwin
which appears very plausible, if dysentery
was contagious, it would be a much more mild
disease than it is, and would admit of the
antiphlogistic plan of treatment alone
for its cure, of which history sets on record at the
present state of medical science.

There are another set of exciting causes of this
disease, but under which I believe the disease
to be always endemic or confined to a particular
place, as a camp &c. I saw the disease of this
kind, while in camp at Baltimore, in Septem-
ber 1814. This disease was gotten by the provisions
as was supposed, which were very salt and in
fact sometimes putrid. This disease I believe
to be much milder than when taken from
the atmosphere.

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Proximate Cause

According to Dr Rush, the proximate cause of a disease is ipse morbus ~~or~~ the disease itself, and as Mr John Pearson observes, the presence of the one implies the agency of the other, and I believe these are the most generally received opinions now among physicians, for if it was the immediate cause, ^{in that} cause last acting to give a start to the disease, ^{as} as some suppose, the word exciting cause would be superfluous.

There appears to have been and still to exist among physicians, different ~~different~~ opinions with respect to the proximate cause of dysentery, but I believe that the most general and received opinion now is, that it is an inflammation of the mucous membrane lining the intestines, at the commencement of the disease, thence communicating with all their coats, as dissections have shown. It was the opinion of the ingenious and indefatigable Dr Cullen, and sorry am I to differ

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in opinion with him, that the proximate cause
of this disease, is a morbid constriction of the
colon. according to this theory, the disease
would always be confined to that one intestine,
which dissections have proved not to be the fact,
by exhibiting the disease over the whole intestinal
canal, and inflammations, gangrene and mortifi-
cation to have taken place.

It appears that there are some elementary substan-
ces or chemical agents, when applied externally
to the skin will excite inflammation, and as it
is agreed upon by anatomists that the same cuti-
cle which covers the external part of the body,
is reflected through the whole alimentary ca-
nal, why may not then stimulating noxious
vapours, when taken into the system or rather
the stomach and intestines, excite inflammation
then more readily than externally, that being
a much more sensible part of the body, and not be-
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Before going on to treat of the cure of this disease, I will mention, that I am only going to give the treatment I found best and after, to those cases, which came under my immediate observation, which were comparatively mild to the disease as it appeared farther east.

This epidemic was so very mild in many cases as not to require the aid of medicine; In others again it laid the patient prostrate at the very onset of it; The disease in some cases came on slowly, and in so mild a manner, as not to offend the patient of his disease for several days, when all of a sudden some very distressing symptoms would lay him prostrate; in these cases the disease was most malignant, and hardest to manage, and at this late period, the disease very generally put on the typhus form.

As there are several different types this disease puts on, it is of the greatest importance

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to attend to them in the application of remedies.
Of Bloodletting. This remedy appears to have
been employed by every medical author who
has treated of the disease, and it appears to
hold a prominent place in all the books of medi-
cine. Dr Sydenham, whose writings have thrown
considerable light on the management of disease,
say he has employed this remedy, & never with-
out advantage. This is no doubt the fact, but
the disease he met with must have differed
essentially from that which we have in the
United States, for I have been informed by many
practitioners who contended with it in different
parts, that they never employed this remedy,
but with disadvantage, I am likewise satis-
fied of this from my own observations.

Of Cathartics. These are remedies which can be used
in every stage of the disease with advantage,
they should be very brisk in the first stage
of the disease, but where the disease has more

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any progress, they should be of the mildest kind. These cathartics, which I employed, were Glysters salt with little antimonial wines, Olivini, flowers of sulphur, Rhubarb, and as Dr Barton recommends, I employed those large solutions, which did not fulfil my expectations.

of Emetics. These are remedies, which I never omit, deriving so much advantage from them, I should not say emetics here, as I did not employ them for that effect, but solely for their diaphoretic powers, for this purpose I employed a strong powder, and it always fulfilled my expectations, increasing perspiration, lessening the fever, & mitigating the inflammatory symptoms of Blisters. These I employed with great advantage, and have seen them employed in every stage of the disease. I applied them to the extremities and abdomen, they counteract irritation, and open in some degree inflammation.

